MULTIPLE DENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. FILING DATE

APPLICANT(S)

1	U	1	5	4	0	1	7	1
				-	_			

-							1 1110			T U	124	$U \perp I$		
 			1 .=		LAIMS									
1	AS	AS FILED		AFTER 1"AMENDMENT		AFTER 1 "AMENDMENT			AS FILED		AFTER		AFTER 2 "AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.]		IND.	DEP.	IND.	DEP.	IND.	DEP
1		-					5							DEI
2	11.		 		ļ	ļ	52							
3					!		5.7							
5	<u> </u>	+++					54							
6	<u> </u>	11					55 56							<u> </u>
7		111				li	57							
8							58							
9		11					59							
10	<u> </u>	1					60							
11 12		 	 				61							
13		1,'					62							
14		1/-					63 64							
15	1	 					65							
16	1	' <i> </i>					66	+			 			
17							67	1						
18							68	_1-						
19	<u> </u>						69	\perp						
20	ļ						70	_ _						
21 22	 						71							
23	-						72	+		 -				
24							73 74							
25							75	+	- -					
26							76	\top		 				
27							77							
28	 						78							
29 30	11						79	-						
31	1						80 81							:
32	1						82	+			 -			
33							83	1						
34							84	1						
35							85							
36							86							
37							87	-{				· -	 -	
38 39				 ∤-	-+		88	1—						
40							90	1						$\overline{}$
41							91		17					
42							92							
43							93	1_						
44						·	94	-		<u></u> -				
45 46							95 96	┨—						-
47			 -	 -			97	1-						
48			- -				98	1						
49							99							
50							100	\Box					_	
TAL DOD.	2	+		₩ _		₩	TOTAL IND			₽		₩ _		♣
TAL DEP	161	(4	•	4		TOTAL DEP		•				•	
TOTAL	18						TOTAL							
TO-194 (U.S. DEPARTMENT of COMMERCE 0 - 1540 (REV. 144-Q) U.S. DEPARTMENT of COMMERCE Patent and Trademark Office											<u></u>		